File Number:	
84-1968	
For the reporting period ended December 31. 2001	

## UNITED-STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0337			
Expires:	July 31, 2003			
Estimated average burden				
hours per full response 6.00				
Estimated average burden				
hours per intermediate				
response1.50				
Estimated average burden				
hours per minim	ium:			
response				



## **FORM TA-2**

		ATTENTION:	CONSTITUT	AL MISSTATEM E FEDERAL CF 1001 and 15 U.S	UMINAL V	IOLATIONS	SEC MARECEIVED
			and an experience of	The desired the second	to be a supplying the		APR I I 2002
•		I name of Registrant as stated not use Form TA-2 to change name		Form TA-1:			150 150
		H&R Block Fina	ncial Advisor	rs, Inc.	٠		S. C.
2.	a.	During the reporting period. (Check appropriate box.)	has the Registrant	engaged a service co	ompany to perf	orm any of its tr	ansfer agent functi
		□ All	☐ Some	X No	ne		
1	b. If the answer to subsection (a) is all or some, provide the name(s) and transfer agent file number(s) of all s company(ies) engaged:					umber(s) of all se	
Name of Transfer Agent(s): File No. (beginning					ning with 84- or 85- ):		
			<del></del>				
							PROCESSE
						<u> </u>	JUN 2 8 2002
							THOMSON
				·			FINANCIAL
	¢.	During the reporting period transfer agent functions?	, has the Registran	t been engaged as a s	service compar	ny by a named tr	ansfer agent to per
		☐ Yes		No			
	d.	If the answer to subsection ( Registrant has been engaged complete and attach the Su	d as a service comp	oany to perform trans			
						Tile No. (L.)	nning with 84- or 85-)
		Name of Transfer Agent(s)	):			File No. Ibegii	ming with 94- 01 92- 1
		Name of Transfer Agent(s)	):			File No. (begin	ining with 64- or 63- )

3.	a.	Comptroller Federal Dep Board of Go	propriate regular of the Current cost tinsurance covernors of the nd Exchange C	cy Corpora Federal	tion Reserve Syste		only.)				
	b.						within 60 calend eading? (Check				which
		Yes, filed a No, failed to Not applica	o file amendme	ent(s)	•					· .	
	c.	If the answer to	subsection (b)	is no, pi	ovide an expl	anation:					
_											
	•	If t	he response	to any o	of questions	4-11 below i	s none or zer	o, enter "	0."		
4.	Nu	mber of items re	ceived for trans	sfer duri	ng the reportin	g period:		••••••••		0	
5.	a.						ints in the Directorians as of Dece			0	· ·
	Ь.	Number of indi	•			•	Vor direct purch	-		00	
	c.	Number of indi	vidual security	holder D	RS accounts a	s of December	31:			0	
	d.	·			- ,		n subsection (a)				as of
		Corporate Equity Securities	Corporate Debt Securities		Open-End Investment Company Securities	Limited Partnershi Securitie	ip Secur	1		Other curities	
		0	0		0	0		0		0	
6.	Nu	mber of securities	es issues for wh	nich Regi	strant acted in	the following	capacities, as of	December	31:		_
					Corporate Securities	Open-End	Limited	Municip	al	Other Securities	7
				Equity:	Debt	Company Securities	Partnership Securities	Debt Securitie	s	Securities	
	a.	and maintains securityholder	the master files:	0	0	0	0	0		0	
	ъ.	but does not m master security	aintain the holder files:	0	0	0	0	0		0	
	¢.	:							1		

transfer but maintains the

master securityholder files:

7. 'S	Scope of certain additional types of activities performed:		
a.	Number of issues for which dividend reinvestment pla		0
-	services were provided, as of December 31:		
	Number of issues for which DRS services were provide		
C.	Dividend disbursement and interest paying agent active		
	i. number of issues		109,127,091.82
	ii. amount (in dollars)		100,127,001.02
8. a.	Number and aggregate market value of securities aged December 31:	l record differences, existing for m	nore than 30 days, as of
	•	Prior	Current
	•	Transfer Agent(s)	Transfer Agent
	•	(If applicable)	Transier Agent
	i. Number of issues	(If applicable)	2
		••	
	ii. Market value (in dollars)	••	2,619,437.39
ь	o. Number of quarterly reports regarding buy-ins filed by SEC) during the reporting period pursuant to Rule 172		
	ozo, ad alg inc reporting period parodam to itale 17.	12 11(0)(2):	
· c	c. During the reporting period, did the Registrant file all (including the SEC) required by Rule 17Ad-11(c)(2)?		ns with its ARA
	∑ Yes □	] No	
9. a	During the reporting period, has the Registrant always as set forth in Rule 17Ad-2?	s been in compliance with the turn	around time for routine items
	▼ Yes □	No	
	If the answer to subsection (a) is	no, complete subsections (i) thro	ugh (ii).
	i. Provide the number of months during the reportir		
	compliance with the turnaround time for routine i	tems according to Rule 17Ad-2	
	ii. Provide the number of written notices Registrant SEC and with its ARA that reported its noncompitems according to Rule 17Ad-2.	liance with turnaround time for rou	atine
10. N	Number of open-end investment company securities purcleand distribution postings, and address changes processed	hases and redemptions (transaction during the reporting period:	ns) excluding dividend, interest
	a. Total number of transactions processed:		535
	b. Number of transactions processed on a date other than		

11. a.	During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on
	the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search
	has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a
	result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database	Number of Different Addresses Obtained from Database Search				
	Search					
	<u> </u>	·				

b.	Number of lost securityholder accounts that have	ve been remitted to states during the	
	reporting period:	***************************************	 0

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title:
	Secretary
pilled	Telephone number: (313) 628-1596
Name offOfficial responsible for Form:	Date signed
(First name, Middle name, Last name)	(Month/Day/Year):
of the control of the second s	
Lisa Sue FIldes	03/27/2002